

*N/A 7/17/00*

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ga</i>	<i>12</i>	<i>7/10/00</i>
O.I.P.E. CLASSIFIER	<i>HL</i>	<i>518</i>	<i>7/14</i>
FORMALITY REVIEW			<i>2/17/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
-	(Through numeral).... Canceled	A	..... Appeal
+	..... Restricted	O	..... Objected

Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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